

AGING AND LONG-TERM SUPPORT ADMINISTRATION  
RESIDENTIAL CARE SERVICES  
*"Transforming Lives"*

## CHAPTER 19 – Staff Training

### STAFF TRAINING – OVERVIEW

Residential Care Services' (RCS) Training Unit provides training to RCS employees to enable them to perform their job effectively, efficiently, and with consistent quality across the state. Training unit staff are seasoned experts and are available to help RCS staff develop and maintain job-related skills and techniques.

The training unit is based out of RCS Headquarters (HQ) in Lacey serving RCS employees to provide diverse specialty and continuous trainings in varied job positions in HQ and in field offices across the state. The training unit provides the foundational knowledge, intended to provide a baseline competency for staff across the state. This includes introductory program-specific classroom trainings for field staff. The unit also builds upon this foundation by providing/coordinating additional specialized training, such as food code training, principles of documentation (POD), safety, cultural humility, and mandatory reporting training, as well as Quality Assurance (QA) field visits. Trainings are in a classroom environment at HQ, but may also be considered for online webinars or similar internet based training as able and if appropriate.

Although the training unit provides foundational and specialty education, it is only one component of a larger educational/training program for RCS employees. Other training information sources may include:

- Field Manager (FM)/Supervisor
- RCS peer coaching program
- Learning Management System (LMS)
- Center for Medicare and Medicaid Services (CMS)
- Washington State partner agencies (DOH, HCA, and others)

### SUBJECT MATTER EXPERT

Training Unit Manager, Jeri Jones @ 360-725-2488 or [Jeri.Jones@dshs.wa.gov](mailto:Jeri.Jones@dshs.wa.gov)

## CHAPTER 19 – Staff Training

### OVERVIEW

#### **A. TRAINING REQUIREMENTS, ROLES, AND EXPECTATIONS**

1. [REQUIRED TRAININGS FOR RCS STAFF](#)
2. [CLASSROOM EXPECTATIONS](#)
3. [RESPONSIBILITIES OF TRAINING UNIT STAFF](#)

#### **[B. Peer Coaching for New RCS Employees](#)**

#### **[C. PROGRESS TOOLS](#)**

#### **[D. NURSING HOME STAFF TRAINING](#)**

### **[APPENDIX A: TRAINING RESOURCES AND FORMS](#)**

### **APPENDIX B: [CHAPTER 19 CHANGE LOG](#)**

[Change Log](#)

[Back to Top](#)

## 19A1 – REQUIRED TRAININGS FOR RCS STAFF

### **BACKGROUND**

RCS training is required for all staff in order to establish a standard baseline of knowledge and to ensure consistency across the state. However, depending on position requirements, date of hire, and specific needs identified by the Field Manager (FM), the trainings that are specifically required may vary among staff.

### **PROCEDURE**

- A. All employees new to RCS must attend the “Introduction to RCS” training provided by the training unit in the session/cycle following their hire date. This one-day training is provided multiple times each calendar year at HQ and includes information on RCS and DSHS as organizations, as well as a discussion of roles and responsibilities for all RCS staff.
- B. All employees new to RCS must also complete the RCS New Employee Orientation Packet within six months of hire, including required trainings within. NOTE: The [DSHS form 03-200 \(DSHS New Employee Checklist\)](#) is included in the packet, but must be completed within 60 days of hire.
- C. All new RCS regulatory staff must also take RCS Investigator Training, a 2-day curriculum in the session/cycle following their hire date at HQ. Topics included are the RCS investigation process, scope of authority, data collection, and safety.
- D. All staff working as complaint investigators, licensors, and surveyors in the six long-term care regulatory programs must also take applicable foundational program-specific classroom training, which may include:
  1. Programs following federal and state laws, regulations, and compliance certification components:
    - Nursing Homes
    - Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
  2. Programs following state laws, regulations and compliance requirements:
    - Assisted Living Facilities
    - Adult Family Homes
    - Certified Community Residential Services and Supports (Supported Living)
    - Enhanced Services Facilities
- E. All of the above web or classroom-based trainings are offered multiple times each calendar year at HQ. Any exemptions to the above training requirements must be approved by the director.

- F. In addition to the above, special trainings may be offered as needed, and may be either optional or mandatory as determined by the office chief or director.
- G. The field manager/supervisor may also request a staff member return to any regularly scheduled class for retraining. The FM will provide the trainer pertinent details of areas needing focus in retraining.

[Change Log](#)

[Back to Top](#)

## 19A2 – CLASSROOM EXPECTATIONS

### **BACKGROUND**

The training unit is expected to provide the best training environment possible. The expectations outlined in this subsection are intended to create and encourage a positive training environment.

### **PROCEDURE**

- A. Pre-registration for all trainings is required so that materials may be created and printed ahead of time for each attendee. The Field Manager (FM) must email the staff's name, date of hire, and requested course to the Training Unit's AA3. Registration for re-training follows the same steps as initial training. A new RCS employee must attend the first available required training based on their program setting; however, on a case-by-case basis, the FM may discuss an alternative schedule with the training unit manager.
- B. It is the responsibility of all RCS staff attending training to come to each training prepared by completing all pre-requisite work and with a professional demeanor. This includes:
  - Being at the training on time and ready to learn
  - Being present and engaged with the material
  - No cell phone use in class
  - No disruptive behavior
- C. RCS staff must complete all required training in its entirety to receive completion credit. Registered participants who become ill prior to or during class may be excused by their FM, but are required to take the next class offered. Staff who do not want to join or participate in the training have the freedom to leave and discuss it with their FM. Training staff will not demand that anyone remain in the classroom.
- D. If a training is completed before the end of the staff's regularly scheduled hours, it is the responsibility of the staff to communicate with their supervisor for direction. The trainer does not have the authorization to modify employee work hours.
- E. Upon completion of program specific classroom training, trainers will provide the FMs with a list of topics covered during training and answer any questions the manager may have.

[Change Log](#)

[Back to Top](#)

## **19A3 – RESPONSIBILITIES OF TRAINING UNIT STAFF**

### **PROCEDURE**

- A. New training unit staff (“trainers”) are required to complete Intro to RCS, RCS Investigator Training, and program specific trainings for the appropriate setting(s), if not already completed.
  - 1. Once one cycle of training is completed, new trainers will be involved with curriculum development and training for next cycle of appropriate trainings. A peer will be assigned to the new staff trainer to offer support, though any trainer may be required to assist with the training process.
  - 2. Beginning with the 3<sup>rd</sup> cycle of training after hire, the new trainer will be the lead trainer for their future program specific trainings.
- B. The training unit supervisor may request any trainer to attend any other trainer’s classes for learning or QA purposes. Trainers will provide support for other staff as needed in other programs as determined by the training unit manager.
- C. Each program’s lead trainer is responsible for curriculum development for that specific program as outlined in their job descriptions.
- D. Trainers will ensure sign-in sheets are available at every training and will provide an opportunity for written training evaluation at the end of each session. Trainers will use feedback from evaluations to assess and determine if modifications are necessary. It is the responsibility of the lead trainer to scan both sign-in sheets and evaluations into the designated folder on the Q-Drive. These documents are then filed in the specified folder in the training unit.
- E. The AA3 for the training unit will provide a list of attendees to the appropriate field managers/supervisors and distribute an email calendar invite to all participants prior to the date of the training.
- F. Trainers will provide a QA visit for new regulatory staff when the FM determines the staff member is able to complete tasks independently. Any exceptions must be approved by the training unit supervisor. The date of the QA visit will be coordinated by the FM and trainer. Additionally, QA visits will be completed every two years with the dates coordinated by the FM and trainer.
- G. During a QA visit, the trainer will complete the program-specific Skill Building Tool (see [SOP Chapter 19B](#)), which is submitted to the FM either electronically or in paper form for any required signatures and form retention. The intention of the Skill Building Tool is to provide feedback to the field staff. It is the responsibility of FM to determine how the results are utilized in the employee’s field training process. If a QA visit is requested and the main trainer is not available, a back-up trainer may conduct the visit. The FM may contact the trainer for additional QA visits if further areas of need are determined.

- H. The Skill Building Tools can be found in the [Employee Development Program Skill Building Tools](#) on the RCS intranet.

[Change Log](#)

[Back to Top](#)

## **CHAPTER 19B – STAFF TRAINING: PEER COACHING FOR NEW RCS EMPLOYEES**

### **BACKGROUND**

- All employees are required to attend training at Headquarters in Lacey when they are hired at RCS. Although the classroom training is important and familiarizes new staff with laws, rules and standard operating procedures, their training isn't complete until they have had an opportunity to be trained in the field by a Peer Coach (PC). All new employees must be trained under the guidance of a PC.
- This SOP applies to Peer Coaches and Field Managers. It explains who is eligible to be a PC and what their responsibilities are when training new staff. A PC must:
  - a. Have at least 6 months of experience working independently in their respective program;
  - b. Be QIS registered and SMQT certified if they are coaching someone in the nursing home program;
  - c. Have completed the required federal training if they are coaching someone in the ICF/IID program;
  - d. Be given the time and resources to complete PC tasks;
  - e. Be allowed to mentor only one new employee at a time.

### **PROCEDURE**

#### **A. The Field Manager will:**

1. Upon hiring a new employee, assign the employee a (PC).
2. Meet regularly with the PC and the new employee to discuss progress.
3. Review each progress tool completed by the PC and the new employee.
4. Send an electronic copy of all completed and signed progress tools to the training unit.
5. Ensure the PC is assigned to only one new employee at a time.
6. For the nursing home and assisted living program, and ICF/IID, assure the PC is assigned fewer tasks during a survey/investigation, allowing the PC to focus on mentoring the new employee. For the adult family home program, Enhanced Service Facility program, and CCRSS, assure the PC is assigned fewer inspections/investigations.
7. Monitor for signs of stress or burn out in a PC. Assure a PC feels up to the task before assigning a new employee to him/her.
8. Communicate with the new employee about his or her learning needs before and after each survey/inspection/investigation experience using the progress tools.



9. Ensure the new employee follows Principles of Documentation when writing citations, provide guidance as needed.
10. Collaboratively develop a training plan for the new employee prior to each survey/inspection/investigation that takes into account the new employee's learning needs.
11. Contact the training unit manager if problems arise or there are concerns.

**B. The Peer Coach will:**

1. Become familiar with the orientation materials.
2. Mentor only one new employee at a time.
3. Meet regularly with the new employee and the FM to discuss progress.
4. Collaboratively (with the new employee and the field manager) develop a training plan for the new employee prior to each survey/inspection that takes into account the new employee's learning needs.
5. Communicate with the new employee about his or her learning needs before and after each survey/inspection experience using the progress tools.
6. Allow the new employee to observe, then perform with supervision, each task until he or she is able to demonstrate competency.
7. With the new employee, complete all progress tools for each step of the training process.
8. Provide time for the new employee to discuss and develop interview questions and an investigation plan.
9. Encourage the new employee to give you the rationale and information source for decisions or answers to questions. Discuss other information sources and data gathering tools the new employee could use during the investigation process.
10. Assure the new employee is given the time and guidance to learn and complete each step of the inspection/survey/investigation process.
11. For the NH setting, follow the outlined training curricula and not move ahead in training the new employee in areas not yet covered in the classroom setting.
12. Not leave the new employee to complete tasks independently until he/she has mastered the task with under the supervision of the PC.
13. Discuss any concerns regarding the new employee's learning progress with the FM in a timely manner.

**C. The New Employee will:**

1. Meet regularly with the PC and FM to discuss learning progress and needs.

2. For the NH setting, follow the training curricula and only work on areas already covered in the classroom training.
3. Not complete tasks independently until he/she has been signed off to do so by the FM.
4. Review progress tools with the PC and FM discussing any learning areas that require further practice or training.
5. Alert the PC and FM of any areas where he/she feels further training would be beneficial.
6. For NH, read required information on survey tasks and associated regulations as needed to complete an assignment and to successfully complete testing.
7. Communicate with peer coach on when new task or more survey/inspection responsibility feels comfortable for the new employee.
8. Communicate openly with PC, FM, and training unit on how new employee is feeling about his or her performance and experience.
9. Assist PC in completion of progress tools after each survey/investigation/inspection experience.

#### **QUALITY ASSURANCE REVIEW**

This process will be reviewed at least every two years for accuracy and compliance.

[Change Log](#)

[Back to Top](#)

## 19C – STAFF TRAINING: SKILL BUILDING TOOLS

### **BACKGROUND**

The Skill Building Tools (SBT) are used to track and document the progress of a new regulatory staff and during Quality Assurance (QA) visits conducted by the Residential Care Services (RCS) training unit. These tools assist the staff in tracking areas already mastered and recognize areas which warrant additional practice. The tools also help the field managers (FM) and training unit determine areas where more training, or a different approach to training, is needed.

### **PROCEDURE**

- A. All new regulatory staff, their peer coaches/preceptor (PC), and FM must complete designated SBT to document and track each new regulatory staff's progress toward successful completion of required training and independence.
- B. Though the SBT will be used by the PC and FM for tracking multiple regulatory visits, the tools must be submitted electronically by the FM to the RCS training unit at the following intervals:
  1. **Nursing Homes,:**
    - a. Upon completing an observation survey(s) and prior to starting Classroom Training Session 1;
    - b. Prior to starting Classroom Training Session 2;
    - c. Every 3rd participatory survey thereafter;
    - d. Before scheduling - skill building survey(s); and
    - e. When a FM determines the new regulatory staff can conduct a regulatory visit independently.
  2. **Adult Family Homes:**
    - a. When a FM determines the new regulatory staff can conduct a regulatory visit independently; and
    - b. Prior to any FM requests for QA visits.
  3. **Assisted Living Facilities:**
    - a. When a FM determines the new regulatory staff can conduct a regulatory visit independently; and
    - b. Prior to any FM requests for QA visits.
  4. **Intermediate Care Facilities for Individuals with Intellectual Disabilities:**
    - a. When a FM determines the new regulatory staff can conduct a regulatory visit independently; and
    - b. Prior to any FM requests for QA visits.

**5. Certified Community Residential Services and Supports:**

- a. When a FM determines the new regulatory staff can conduct a regulatory visit independently; and
- b. Prior to any FM requests for QA visits.

**6. Enhanced Services Facilities:**

- a. When a FM determines the new regulatory staff can conduct a regulatory visit independently; and
- b. Prior to any FM requests for QA visits.

C. Any alternate forms/methods of documentation must be approved by the training unit supervisor.

**D. New regulatory staff will:**

1. Become familiar with information contained in the “Curriculum Timeline” document located on the intranet; and
2. Download each SBT from the ALTSA Intranet for “fill-in” completion. To find the tools and timeline, open the RCS home page from the ALTSA intranet at <http://intra.altsa.dshs.wa.gov/rcs/EDPTemplates.htm>
  - A. On the right side of the page open “FORMS/DOCUMENTS” and click on “Employee Development Program Skill Building Tools;”
  - B. On the left side of the page, open the appropriate form under “Skill Building Tools”; and
  - C. With the PC and FM, review, and sign the SBT; then submit electronically to the appropriate RCS Training Unit program manager.

**E. The Peer Coach/Preceptor will:**

1. Assist the new regulatory staff with accessing the SBT;
2. Complete the SBT to provide feedback to the new regulatory staff after each field experience;
3. Answer questions the new regulatory staff may have regarding the SBT; and
4. Review the Skill Building Tools with the FM and new regulatory staff, and set goals for learning.

**F. The Field Manager will:**

1. Become familiar with information contained in the “Curriculum Timeline” document;
2. Review the SBT with the PC and new regulatory staff; and

3. Ensure the required SBT are completed, signed, and submitted electronically to the appropriate RCS Training Unit program manager at the designated intervals.

**G. The Training Unit will:**

1. Utilize the SBT when conducting QA visits with field staff;
2. Conduct QA visits with new regulatory staff after the FM determines the staff member is prepared to be independent in the field and has completed all required trainings;
3. Conduct QA visits with all regulatory staff members every 2 years and ensure QA visits are completed for each specific role of a staff member;
4. Complete the SBT after the QA visit is completed and electronically send the tool to the new regulatory staff with a cc to the FM; and
5. If requested, discuss the feedback with FM and regulatory staff.

**QUALITY ASSURANCE REVIEW**

- A. This process will be reviewed at least every two years for accuracy and compliance.

[Change Log](#)

[Back to Top](#)

## 19D – NURSING HOME STAFF TRAINING

### **BACKGROUND**

To clarify and further define requirements that must be met for an individual to be approved as a permanent nursing home (NH) surveyor in Residential Care Services (RCS).

This SOP applies to new RCS staff being trained to become NH surveyors (“surveyors in training”). It also includes the responsibilities of field managers, peer coaches, and the RCS training unit.

### **PROCEDURES**

- A. Within one year of being hired, NH surveyors in training must successfully complete the following in the order listed:
  - 1 Washington State Quality Indicator Survey (QIS) training;
  - 2 All components of the skills assessment survey(s) (this could take place across more than one survey)
  - 3 Federal Basic QIS Long Term Care (LTC) Surveyor Training; and
  - 4 Pass the Surveyor Minimum Qualifications Test (SMQT)
- B. State QIS training is divided into three classroom training sessions.
- C. Surveyors in training will participate in practice surveys between classroom training sessions.
- D. Each surveyor in training must successfully complete a training session, including assigned practice surveys, before progressing to the next session.
- E. After completing all three training sessions, the individual must participate in skills assessment survey(s).
- F. Upon successful completion of the skills assessment, to include Team Coordinating, the surveyor in training will attend Federal Basic LTC Surveyor Training and complete the SMQT.
- G. A surveyor in training is on probation for six months following their date of hire. The individual’s field manager may extend probationary status for up to six additional months
- H. If the surveyor in training does not complete all required training within one year of hire, the individual may be terminated from the position unless, due to extenuating circumstances, an exception is made by the Office Chief of Field Operations.

- I. Each surveyor in training will have an individualized growth and development plan including goals and objectives, and bimonthly progress reviews with their manager.
- J. A peer coach will be assigned to assist and evaluate the surveyor in training's progress.

## **RESPONSIBILITIES**

### **SURVEYOR IN TRAINING**

- A. Participate in at least one "observation only" NH survey before attending RCS Orientation.
- B. Must attend, in its entirety, each scheduled State QIS training class in the order it is presented.
- C. Participate as required in each assigned practice NH survey. NH survey participation requirements can only be met if the individual is present for the entire survey process.
- D. Comply with all required standards of conduct and dress during the NH survey.
- E. Participate as required with field manager and peer coaches, and RCS training unit staff as needed, in the evaluation of progress toward meeting goals and objectives.
- F. Attend Federal Basic QIS Long Term Care Surveyor Training as required.
- G. Successfully complete the SMQT.

### **PEER COACHES**

- A. Mentor and evaluate an assigned surveyor in training.
- B. Assist with the completion of all required training progress forms.
- C. As required, meet with the surveyor in training and field manager to discuss progress and/or concerns related to the individual's goals and objectives, or performance.

### **FIELD MANAGERS**

- A. Track and evaluate the individual's in training progress and performance
- B. Assign surveyor in training to participate in practice NH surveys and assign a peer coach
- C. Coordinate and communicate with the surveyor in training, peer coach, and RCS training staff as required to review progress and/or concerns related to the individual's goals and objectives, or performance.
- D. Ensure that all mandatory training progress forms are completed as required and submitted to the RCS training unit on time.

### **RCS TRAINING UNIT**

- A. Schedule and conduct all State QIS training activities including classroom training and skills assessment surveys.
- B. Provide feedback and recommendations to field managers and surveyors in training regarding the individual's progress and performance.
- C. Provide training certificates to each surveyor in training after successful completion of three classroom training sessions and skills assessment survey(s).
- D. Schedule Federal QIS Training for surveyors in training.
- E. Schedule SMQT for each surveyor in training after he/she has successfully completed all QIS training requirements.

### **QUALITY ASSURANCE REVIEW**

This process will be reviewed at least every two years for accuracy and compliance.

[Change Log](#)

[Back to Top](#)



## APPENDIX A – STAFF TRAINING: FORMS AND RESOURCES

### FORMS (LINKS)

- A. [Roadmap to ALF Progress Tool](#)
- B. [Roadmap to CCRSS Progress Tools](#)
- C. [Roadmap to ICF/IID Progress Tools](#)
- D. [Roadmap to AFH Progress Tools](#)
- E. [Roadmap to NH Progress Tools](#)

### RESOURCES

- 1. [CMS Abbreviations and Acronyms](#)
- 2. [DSHS Acronyms](#)

[Change Log](#)

[Back to Top](#)

## APPENDIX B - CHAPTER 19 – STAFF TRAINING CHANGE LOG

EFFECTIVE DATE	CHAPTER SECT #	WHAT CHANGED? BRIEF DESCRIPTION	REASON FOR CHANGE?	COMMUNICATION & TRAINING PLAN
06/07/19	19A, 19C	Clarity updates, including amending expectations for the SBT process	Updated expectations	<b>MB Issued – R19-042</b>
10/31/18	19A	Establishment of general staff training requirements, training unit roles and expectations, including new overview section.	Establishment of new section.	<b>R18-067</b>
April 2017	19	Establishment of chapter	Establishment of chapter	

[Back to Top](#)